

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>4685</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>Charles</u> <u>S</u> <u>Loftin</u> P.O. Box, Bldg., Room No., if any Street <u>8380 Jeff Hamilton Road</u> City <u>Mobile</u> State <u>Alabama</u> ZIP Code + 4 <u>36695</u>	4. Name, file number, and address of labor organization. Name <u>Int. As. of Bridge, Str., and Orn. Iron Workers</u> Labor Organization File Number <u>056-366</u> P.O. Box, Building and Room Number, if any Street <u>7920 Crary Station Road</u> City <u>Semmes</u> State <u>Alabama</u> ZIP Code + 4 <u>36575</u>
5. Position in labor organization. <u>Business Manager</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed Charles S Loftin

On 7-25/05 251 445 2477
Date Telephone Number

Name of Person Filing Charles Loftin

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Investment Performance Services, LLC

Trade Name, if any:

P.O. Box, Bldg., Room No., if any Suite 100

Street 7402 Hodgson Memorial Drive

City Savannah

State Georgia ZIP Code + 4 31406

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name AF of L AGC Building Trades

Trade Name, if any:

P.O. Box, Bldg., Room No., if any P.O. Box 1492

Street 801 St Francis Street

City Mobile

State Alabama ZIP Code + 4 36633-0801

11.a. Nature of such dealing.

All Trustees Were Invited to Dinners from Investment Performance Services, LLC (an investment consulting company that provides services for AF of L AGC Building Trades)

11.b. Approximate dollar value of such dealing.

\$179

12.a. Nature of interest held or income received.

none

12.b. Amount.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name AF of L AGC Building Trades

Trade Name, if any:

P.O. Box, Bldg., Room No., if any P.O. Box 1492

Street 801 St Francis Street

City Mobile

State Alabama ZIP Code + 4 36633-0801

14.a. Nature of payment.

Lunch Provided During Trustee Meetings

13.b. Is the Business an Employer ☒ or Consultant ☐ ?

14.b. Amount of payment.

\$110